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•	Name (print)			Office (if applicable		emblyma.	District (if applicable)
	Mailing Addre	ess (include city and	zip code)	Elen no. 898	73	773-7 Telephone No.	38-1861
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		Annual Filing - 1 eriod: January 1, 20	Due January 1 005 – December 3	15, 2006 31, 2005			
		Report #1 — Due eriod: Jan. 1, 20	9 August 8, 20 206 — Aug 3, 200				
		Report #2 Due — Period: Aug. 4, 20	- October 31, 006 — Oct. 26, 20			JAN	13,2006
•		t eport #3 Due - eriod: Oct. 27, 2	- January 15 , : 2006 — Dec. 31, 2			SECRET,	N HELLER ARY OF STATE
		nnual Filing – C eriod: January 1				FOI	R OFFICE USE ONLY
	* Thes	e Reports are f d Report suffice	iled by incum es for 2007 An	bents/candidates ru inual Filing if candid	nning for office in ate also filed Rep	the 2006 election ort Nos. 1 and 2	
		CONTRI	BUTIONS SUI	MMARY Decis	1,2004	14, 196, 3 This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting
	1. Tota	al Monetary Contribu	utions Received in	Excess of \$100		7 000	Period
	2. Tota	I Monetary Contribu	itions Received of	\$100 or Less		-8-	
	3. Tot		utions in the form	of loans guaranteed by a	third	-0-	
	4. Tota (Se	al Monetary Contribute page 2 of instruc	utions in the form tion sheet)	of loans that were forgiven		-11-	
			·	1 - 1925 (3.1.1		(/	·
	·			This Perio	Report Period # Through End of This Reporting	7. / 1 - /.	
	5. To	tal Amount of Mone	etary Contributio		Beginning of Report Period # Through End of	7. / 1 - /.	1 9
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	5. Total Registration (Addition of 12. Dissipation of 12. Dissipation of 12. Total Registration of 12. Dissipation of 12. Dissipation of 13. Total Registration of 14. Total Registration of 15. Dissipation of 15. Dissipatio	iceived decired through 4 al Amount of Written tributions (When complete in the Indiana and Indiana an	(See page 2 of Instruction in Miniment is funded, regind()) theet) Contributions Record See page 2 of Instructions (See page 2 of Instructions See page 2 of Instructions (See page 2 of Instructions #3, Annual Reparter candidates or reelection) sheet)	eruction sheet) port as erved in crition sheet) EXPENSES s of \$1000 r Less see Paid instruction sheet) ss eet) ort or 15th defeat or AFFIRM	Beginning of Report Period # Through End of Through	10,885,7 328:2 1,213,9	7,000

Name (print)

1

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

Office (if applicable)

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 ^{TO} PARTY IF LOAN GUARANTEED BY 3 ^{TO} PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
Bepublic		500.00			
Somes!"	any 3 05	\$5.0			
Daniel	1. —				
Chillep monis	State 3	500.00			·
S'hille Monis	21. 7	111111			
Lacraments Rand d. Investment	Hov. 3	1,000.00			
L.V.	Lec. 1	1,000.00			
K. K. B. R. and F.	DW.1	1,000,00			
Lill	Dec. 5	1,00000	•		,
L. V. Focus Diguity Many	,	3000			
2.0.	Dec. 5	3 100 00			
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Land to the same of the same o	en e		The state of the s	<u> </u>	P. CHEENDELL, Free
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		\$ 7000.00			

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PAGE TOF

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Revised: Oct-05

Name (print) Office (if applicable) Distr

District (if applicable)

Expense Categories

CODE	CATEGORIES
A	Office expenses 450
В	Expenses related to volunteers — — —
С	Expenses related to travel 1226 48
D	Expenses related to travel 1226 48
E	Expenses related to paid staff
F	Expenses related to consultants 300
G	
Н	Expenses related to special events /00
	** Goods and services provided in kind for which money would otherwise have been paid
J	Other miscellaneous expenses - Mon - Snight 7.396.93
	** Goods and services provided in kind for which money would otherwise

PAGE_S_OF_

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Name (print)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Tsunomi Relief	,]	Jan 16,05	350,00
Western Heritage			10
Wells, new	J	fan. 23	250 10
Eller Janeor Celier	J	Feb. 21	300
of rends of medias	,	1	100 10
Apring lieb High school	<i>\</i>	mas.2	
Language and	D	Mas 17	7500
Lawden Vetrastento		mn. 21	101.00
Erin Dusself	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11001.01	
~	君 F.	May 21	300
Jan Evans memorial		Gnl 28	250'
Scholarship Legislating Council Burenn	<u> </u>	J	
3 flag for Sanny heeb/1.5.	· J	may M	75 93
Silver State Stangeds			UL
Ellr	J	Junel	730
July 4th French	1	1.12	1110
Carl	- V	Juni -	100-
4th July parall	H	July 2	70 '=
Consy			4,171,93

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Name (print) Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

Office (if applicable)

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Free Ores Elho Leine andmes Ehr	D	July 18	1326
	C	dug 5	238 40
J. C. entergris Ether	A	duy.8	25000
leliphore cosh	G	Suy 10	300
Genann West . Eller	6	Aug 15	298 40
Gladenin agricio	1	419	170
Western Frelly + Cents	,	List.30	1500
L. E. enleginse - Elle	J /n		200
telyhord Glar 4-11.	1/	Set. 3	•
Smalin	<u> </u>	Act. 5	1200
Lis Vigas-trans	C	Act. 18	3/2 40
Caucus branif		2 1 2 2	77.28-
El Word West Who		au	0(
Candy-nevedall my Dande	H	nov. 2	30- 590048

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Name (print) Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

Office (if applicable)

CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
1	An. 10	230
	Nr.12	231
D	Dec. 20	139 60
	Da. 22	500 14
	(See Previous Page)	(See Previous Page) NRS 294A.365 Aw./ Aw./ Duc.20 July 22

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